

|  |  |   |  |   |  |   |  |
|--|--|---|--|---|--|---|--|
| <b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b>  |  |   |  | <b>1. Requisition Number</b><br>SEE SCHEDULE  |  | <b>Page</b> 1 <b>Of</b> 4   |  |
| <b>Offeror To Complete Block 12, 17, 23, 24, &amp; 30</b>  |  |   |  |   |  |   |  |
| <b>2. Contract No.</b><br>DAAE07-01-D-T064   |  | <b>3. Award/Effective Date</b><br>2003OCT10   |  | <b>4. Order Number</b><br>0004  |  | <b>5. Solicitation Number</b>   |  |
| <b>6. Solicitation Issue Date</b>  |  |   |  |   |  |   |  |
| <b>7. For Solicitation Information Call:</b>   |  | <b>A. Name</b><br>TODD R. BURROWS   |  | <b>B. Telephone Number (No Collect Calls)</b><br>(586) 574-7253   |  | <b>8. Offer Due Date/Local Time</b>   |  |
| <b>9. Issued By</b><br>TACOM WARREN BLDG 231<br>AMSTA-AQ-AHPB<br>WARREN, MICHIGAN 48397-5000<br><br>HTTP://CONTRACTING.TACOM.ARMY.MIL<br><br><b>e-mail:</b> BURROWST@TACOM.ARMY.MIL  |  | <b>10. This Acquisition Is</b><br><input checked="" type="checkbox"/> Unrestricted<br><input type="checkbox"/> Set Aside: % For<br><input type="checkbox"/> Small Business<br><input type="checkbox"/> Small Disadv Business<br><input type="checkbox"/> 8(A)<br><br><b>SIC:</b><br><b>Size Standard:</b> |  | <b>11. Delivery For FOB Destination Unless Block Is Marked</b>  |  | <b>12. Discount Terms</b><br>NET 15 DAYS  |  |
|  |  |   |  | <input checked="" type="checkbox"/> See Schedule  |  |   |  |
|  |  |   |  | <input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)   |  |   |  |
|  |  |   |  | <b>13b. Rating</b> DOA4   |  |   |  |
|  |  |   |  | <b>14. Method Of Solicitation</b>   |  | <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP  |  |
| <b>15. Deliver To</b><br>SEE SCHEDULE  |  | <b>Code</b>   |  | <b>16. Administered By</b><br>SUPSHIP NEW ORLEANS<br>2300 GENERAL MEYER AVE<br>NAVAL SUPPORT ACTIVITY, BLDG. 16<br>NEW ORLEANS, LA 70142-5700   |  |   |  |
| <b>Code</b>  |  |   |  | <b>Code</b> N63124  |  |   |  |
| <b>Telephone No.</b>   |  |   |  |   |  |   |  |
| <b>17. Contractor/Offeror</b><br>BOLLINGER / INCAT USA, L.L.C.<br>8365 HIGHWAY 308<br>LOCKPORT, LA. 70374-3954   |  | <b>Code</b> 1UDCO   |  | <b>Facility</b>   |  | <b>18a. Payment Will Be Made By</b><br>DFAS ST. LOUIS<br>BLDG 110, P.O. BOX 200009<br>4300 GOODFELLOW BLVD<br>ST. LOUIS MO 61320-0009 |  |
| <b>Code</b>  |  |   |  | <b>Code</b> S23036  |  |   |  |
| <b>Telephone No.</b>   |  |   |  |   |  |   |  |
| <input type="checkbox"/> 17b. Check If Remittance Is Different And Put Such Address In Offer   |  | <b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b><br><input type="checkbox"/> See Addendum  |  |   |  |   |  |
| <b>19. Item No.</b>  |  | <b>20. Schedule Of Supplies/Services</b>  |  | <b>21. Quantity</b>   |  | <b>22. Unit</b>   |  |
|  |  |   |  |   |  |   |  |
|  |  | SEE SCHEDULE  |  |   |  |   |  |
|  |  | (Attach Additional Sheets As Necessary)   |  |   |  |   |  |
| <b>25. Accounting And Appropriation Data</b><br>ACRN: AA 21 32040000031C1C09P654804255Y S20113 W56HZV  |  |   |  | <b>26. Total Award Amount (For Govt. Use Only)</b><br>\$1,345,860.00  |  |   |  |
| <input type="checkbox"/> 27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.   |  |   |  | <input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.   |  |   |  |
| <input checked="" type="checkbox"/> 27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda   |  |   |  | <input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.  |  |   |  |
| <b>28. Contractor Is Required To Sign This Document And Return</b> 2 <b>Copies</b><br><input checked="" type="checkbox"/> To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein. |  |   |  | <b>29. Award Of Contract: Reference</b> _____ <b>Offer</b><br><input type="checkbox"/> Dated _____. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items: |  |   |  |
| <b>30a. Signature Of Offeror/Contractor</b>  |  |   |  | <b>31a. United States Of America (Signature Of Contracting Officer)</b>   |  |   |  |
| <b>30b. Name And Title Of Signer (Type Or Print)</b>   |  | <b>30c. Date Signed</b>   |  | <b>31b. Name Of Contracting Officer (Type Or Print)</b><br>TOD MILLER /SIGNED/<br>MILLERT@TACOM.ARMY.MIL (586) 574-8895   |  | <b>31c. Date Signed</b>   |  |
| <b>32a. Quantity In Column 21 Has Been</b><br><br><input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted  |  |   |  | <b>33. Ship Number</b><br><br><input type="checkbox"/> Partial <input type="checkbox"/> Final   |  | <b>34. Voucher Number</b>   |  |
| <b>32b. Signature Of Authorized Government Representative</b>  |  | <b>32c. Date</b>  |  | <b>36. Payment</b><br><input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final   |  | <b>37. Check Number</b>   |  |
|  |  |   |  | <b>38. S/R Account Number</b>   |  | <b>39. S/R Voucher Number</b>   |  |
|  |  |   |  | <b>40. Paid By</b>  |  |   |  |
| <b>41a. I Certify This Account Is Correct And Proper For Payment</b>   |  |   |  | <b>42a. Received By (Print)</b>   |  |   |  |
| <b>41b. Signature And Title Of Certifying Officer</b>  |  | <b>41c. Date</b>  |  | <b>42b. Received At (Location)</b>  |  |   |  |
|  |  |   |  | <b>42c. Date Recd (YYMMDD)</b>  |  | <b>42d. Total Containers</b>  |  |

|  |   |         |             |
|--|---|---------|-------------|
| CONTINUATION SHEET   | Reference No. of Document Being Continued |         | Page 2 of 4 |
|  | PIIN/SIIN DAAE07-01-D-T064/0004           | MOD/AMD |             |
| Name of Offeror or Contractor: BOLLINGER / INCAT USA, L.L.C. |   |         |             |

SUPPLEMENTAL INFORMATION

1. The purpose of this Delivery Order 0004 is extend the lease period at a rate of \$22,431.00 per day for 60 days from October 11, 2003 to Dec 10, 2003.
2. As a result of this action CLIN 0001AA hereby added to Delivery Order 0004.
3. As a result of this action Delivery Order 0004 is hereby established in the amount of \$1,345,860.00, and all other contract terms and conditions remain in full force and effect.

\*\*\* END OF NARRATIVE A 001 \*\*\*

Name of Offeror or Contractor: BOLLINGER / INCAT USA, L.L.C.

| ITEM NO | SUPPLIES/SERVICES  | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---------|--|----------|------|------------|--------|
|         | SUPPLIES OR SERVICES AND PRICES/COSTS  |          |      |            |        |
| 0001    | <u>SERVICES LINE ITEM</u><br><br>SECURITY CLASS: Unclassified  |          |      |            |        |
| 0001AA  | <u>SERVICES LINE ITEM</u><br><br>NOUN: HSV LEASE FY04<br>PRON: E132C524EH      PRON AMD: 01      ACRN: AA<br>AMS CD: 65480446100<br><br><u>Inspection and Acceptance</u><br>INSPECTION: Origin      ACCEPTANCE: Origin<br><br><u>Deliveries or Performance</u><br>DLVR SCH |          |      |            |        |

Name of Offeror or Contractor: BOLLINGER / INCAT USA, L.L.C.

CONTRACT ADMINISTRATION DATA

| PRON/       |            | OBLG |      | JOB                                   |        | ACCOUNTING |    | OBLIGATED    |
|-------------|------------|------|------|---------------------------------------|--------|------------|----|--------------|
| LINE        | AMS CD/    |      |      | ORDER                                 |        | STATION    |    | AMOUNT       |
| ITEM        | MIPR       | ACRN | STAT | ACCOUNTING CLASSIFICATION             | NUMBER |            |    |              |
| 0001AA      | E132C524EH | AA   | 1    | 21 32040000031C1C09P654804255Y S20113 | 32C524 | W56HZV     | \$ | 1,345,860.00 |
| 65480446100 |            |      |      |                                       |        |            |    |              |
| TOTAL       |            |      |      |                                       |        |            | \$ | 1,345,860.00 |

| SERVICE |               | ACCOUNTING                            |        | OBLIGATED       |
|---------|---------------|---------------------------------------|--------|-----------------|
| NAME    | TOTAL BY ACRN | STATION                               |        | AMOUNT          |
| Army    | AA            | 21 32040000031C1C09P654804255Y S20113 | W56HZV | \$ 1,345,860.00 |
| TOTAL   |               |                                       |        | \$ 1,345,860.00 |